

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10251280

FILING DATE 1-5-04

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1	1						51		①				
2		1					52		①				
3		1					53		①				
4		3					54						
5		1					55						
6		①					56						
7		3					57						
8		3					58						
9		3					59						
10		3					60						
11		3					61						
12		3					62						
13		3					63						
14		3					64						
15		3					65						
16		3					66						
17		3					67						
18		1					68						
19		1					69						
20		1					70						
21		1					71						
22		①					72						
23		①					73						
24		1					74						
25		①					75						
26		1					76						
27		1					77						
28	1						78						
29		①					79						
30		①					80						
31		①					81						
32		①					82						
33		①					83						
34		①					84						
35		①					85						
36		①					86						
37		①					87						
38		①					88						
39		①					89						
40		①					90						
41		①					91						
42		①					92						
43		①					93						
44		①					94						
45	1						95						
46		①					96						
47		①					97						
48		①					98						
49		①					99						
50	1						100						
TOTAL IND.	4						TOTAL IND.						
TOTAL DEP.	70						TOTAL DEP.						
TOTAL CLAIMS	74						TOTAL CLAIMS	33					